

78
6-26-01

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | HL | | 5-10-01 |
| O.I.P.E. CLASSIFIER | | 48 | 5/2/01 |
| FORMALITY REVIEW | MM | 572 | 06-25-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

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| Claim | Date |
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| Final | |
| Original | |
| 10 | 5/2/01 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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MS
5/2/01